
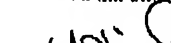



Dnc Code:

PTO/BB/01A (03-04)
Approved for use through 02/30/2006. OMB 0551-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.


**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN
APPLICATION DATA SHEET (37 CFR 1.76)**

Title of Invention	DENTAL TOOL GUIDES
As the below named inventor(s), I/we declare that: This declaration is directed to: <input type="checkbox"/> The attached application, or <input checked="" type="checkbox"/> Application No. <u>10/543,034</u> filed on <u>1.A. January 23, 2004</u> <input checked="" type="checkbox"/> as amended on <u>July 21, 2005</u> (if applicable);	
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;	
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;	
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.	
All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.	
FULL NAME OF INVENTOR(S)	
Inventor one:	Uriel WEINSTEIN
Signature:	 Citizen of: Israel
Inventor two:	Yuval YOHAI
Signature:	 Citizen of: Israel
Inventor three:	Opher KINROT
Signature:	 Citizen of: Israel
Inventor four:	
Signature:	Citizen of:

☐ Additional inventors or a legal representative are being named additional form(s) attached hereto.
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-0199 and select option 2.

BEST AVAILABLE COPY

TRANSMITTAL LETTER (General - Patent Pending)				Docket No. 368/04648	
In Re Application Of: Uriel WEINSTEIN et al.					
Application No. 10/543,034	Filing Date I.A. Jan 23, 2004	Examiner unknown	Customer No. 44909	Group Art Unit unknown	Confirmation No. 8970
Title: DENTAL TOOL GUIDES					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is: Power of Attorney including Statement under 37 CFR 3.73(b) and copy of an assignment					
in the above identified application.					
<input checked="" type="checkbox"/> No additional fee is required. <input type="checkbox"/> A check in the amount of _____ is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 03-3419 as described below. <input type="checkbox"/> Charge the amount of _____ <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional fee required. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ <i>Signature</i>			Dated: April 20, 2006		
Michael J. GERVER Reg. No. 52,940 William. H. Dippert, Esq. Wolf, Block, Schorr & Solis-Cohen LLP 250 Park Avenue New York, NY 10177 Tel: (212) 986-1116 cc:					
<div style="border: 1px solid black; padding: 5px;"> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p> <p>_____</p> <p style="text-align: center;">(Date)</p> <p style="text-align: center;">_____ <i>Signature of Person Mailing Correspondence</i></p> <p style="text-align: center;">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></p> </div>					

Doc Code:

PTO/SB/81 (11-04)

Approved for use through 11/30/2005. OMB 0851-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/543,034
Filing Date	L.A. January 23, 2004
First Named Inventor	Uriel WEINSTEIN
Title	DENTAL TOOL GUIDES
Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	368/04648

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint

☒ Practitioners associated with the Customer
Number:

44909

☐ OR
Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

☐ Firm or

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Dr. Gerald Niznick</i>	Date	April 14/06
Name	Dr. Gerald NIZNICK	Telephone	702-933-8801
Title and Company	President, Tactile Technologics LLC		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

BEST AVAILABLE COPY

Doc Code:

PTO/SB/86 (12-05)
Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Uriel WEINSTEIN et al.

Application No./Patent No./Control No.: 10/543,034 Filed/Issue Date: I.A. January 23, 2004

Entitled: **DENTAL TOOL GUIDES**

Tactile Technologies LLC

, a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at _____, Frame _____, or a true copy of the original is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

- ☐ Additional documents in the chain of title are listed on a supplemental

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Gerald Niznick
Signature

Gerald NIZNICK

Printed or Typed Name

President

Title

April 10/06
Date

702 933 3801
Telephone number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

BEST AVAILABLE COPY

ASSIGNMENT

In consideration of the sum of one dollar (\$1.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged,

Uriel WEINSTEIN, 31 Tarmag Street, Mazkeret-Batya 76804, Israel, ID No. 069859593

Yuval YOHAI, 17 Smilansky Street, Rehovot 76446, Israel, ID No. 022792824; and

Opher KINROT, 22 Herzel Street, Raanana 43354, Israel, ID No. 057767469

(hereinafter called the "Assignors") hereby sell, assign and transfer to

Tactile Technologies LLC, 3993 Howard Hughes Parkway, Suite 540, Las-Vegas NV 89101, USA, a company incorporated under the laws of the State of Nevada

(hereinafter called the "Assignee"), its successors, assigns, nominees or other legal representatives, their entire right, title and interest in and to the invention(s) titled

Dental Tool Guides

described and claimed in PCT Application No. PCT/IL2004/000069 filed on January 23, 2004

and in and to said Patent Application and all patent applications derived therefrom, and all original and reissued patents granted therefor, and any and all national phases, continuations and divisions thereof, including, but not limited to, any and all extensions, reexaminations, substitutes and renewals, and including the right to apply for and obtain patents in the US, Canada and all other countries, the priority rights under International Conventions, and any and all Letters Patent which may be granted thereon; all rights to collect and retain all royalties and other considerations arising from said patent applications; and all rights to sue for past, present and future infringement; and the right to collect and retain all damages collected or awarded thereunder;

Said Assignors warrantee that they have the full right to convey the entire interest herein assigned, and that they have not executed and will not execute any agreement in conflict herewith;

Said Assignors authorize and request any Official of any country whose duty it is to issue patents on applications as aforesaid, to issue said Letters Patent to said Assignee, its successors, assigns, nominees or other legal representatives, for the sole use and benefit of said Assignee, its successors, assigns, nominees or other legal representatives; and

Said Assignors agree to sign all lawful papers, make all rightful oaths, do all lawful acts requisite for such patent applications, and do everything possible to aid said Assignee, its successors, assigns, nominees or other legal representatives, to apply for, obtain and enforce patent protection for said invention(s).

Signed (mo/day/yr) 2/4/04 at (city) Rehovot by [Signature]
Uriel WEINSTEIN

Witness [Signature]

Signed (mo/day/yr) 2/4/04 at (city) Rehovot by [Signature]
Yuval YOHAI

Witness [Signature]

Signed (mo/day/yr) 2/4/04 at (city) Rehovot by [Signature]
Opher KINROT

Witness [Signature]

BEST AVAILABLE COPY